

EX PARTE OR LATE FILED



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June 2, 1995

EX PARTE - COPY ORIGINAL

Mr. William F. Caton
Acting Secretary
Federal Communications Commission
Washington, DC 20554

RECEIVED
JUN - 2 1995
FEDERAL COMMUNICATIONS COMMISSION
OFFICE OF SECRETARY

RE: Ex Parte Filing - CC Docket No. 92-256 (GTE ONA)

Dear Mr. Caton:

Mike Drew and Gordon Maxson of GTE met with Ms. Rose Crellin and Ms. Lisa Gelb of the Policy and Program Planning Division of the Common Carrier Bureau on June 1, 1995 to discuss the above matter.

The following questions/clarifications need to be addressed as indicated:

1. Respond by June 30, 1995 on the status of the BSEs in GTE's ONA Plan that were not proposed to be placed in the access tariffs (i.e., GTE will place into tariffs, GTE will file waivers, or GTE will not place into tariffs and why).
2. Modify GTE's 120-Day New Service Request Implementation Plan to add the FCC's four criteria that will be used by GTE to perform the assessment of the requests.
3. Modify GTE's Individual CPNI Implementation Plan to include how the different multi-line business categories will be treated in the notification process (i.e., "2-20 line" business customers versus "greater than 20 line" business customers).
4. Explain how GTE's interim "partial restriction" process will be implemented and when further restriction capabilities will become available. On the next version of the CPNI notification letters, move the partial restriction option above Section B.
5. Explain when GTE plans to implement the capability within its systems which will allow partial restriction of certain CPNI information, as requested by a multi-line business customer, from GTE's representatives which can sell enhanced services (i.e., blanking of certain fields of information in the account via CPNI restriction capabilities). Explain how customer representatives will be told to distinguish between the "2-20" and "over 20" groups of customers.
6. Clarify in GTE's Interface Functionality CEI Implementation Plan what is meant by "technically measurable differences in specific interface performance characteristics" which will always be minimal enough that there are no perceptible differences to the end users in language consistent with that used in Computer III (104 FCC2d 1036).

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Mr. William F. Caton
June 2, 1995
Page 2

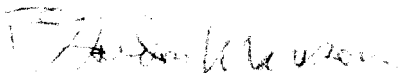
7. Clarify in GTE's Availability of CEI Implementation Plan that any new BSAs which will be used by GTE's ESP will be available for 90 days for testing by any ESP and that GTE's ESP will not obtain the service any earlier than when it is available to other ESPs under tariff.
8. Clarify in GTE's Minimization of Transport Costs Implementation Plan, that if GTE's ESP equipment is physically collocated in the GTE central office, which price GTE will pay for any network services that are distance sensitive consistent with the parameters specified in ¶168 of the BOC ONA MO&O. (4 FCC Rcd 1 @ 87).
9. Categorize the GTE files/data bases, identified in Attachment A of GTE's May 30, 1995 ex parte filing, per the categories discussed in paragraphs 24-25 of the Commission's March 29, 1993 Memorandum Opinion and Order in CC Docket No. 88-2, Phase I (i.e., primary databases used to perform service order processing, marketing, and billing; primary databases used in provisioning and maintaining the network; and historical databases not regularly accessed by enhanced services marketing personnel).

Except for the first item above, the responses are to be filed in an ex parte notice as soon as possible during the week of June 6. As a point of clarification, the draft Arkansas state ONA tariff which was provided to the State of Hawaii mirrors the proposed interstate ONA tariff.

Attached is the Service and Network Capability Request Form which GTE proposes to use.

Two copies of this Notice are hereby filed with the Secretary of the Commission in accordance with Section 1.1206(a)(2) of the Rules. Please include this letter in the record of this proceeding.

Sincerely,



F. Gordon Maxson
Director - Regulatory Affairs

C: Ms. Rose Crellin
Ms. Lisa Gelb

Attachment

SERVICE AND NETWORK CAPABILITY REQUEST FORM

GENERAL INFORMATION

TRACKING NUMBER (for GTE use):

CUSTOMER CONTACT INFORMATION

Company Name: _____

Company Address: _____

Company Contact(s): _____

Contact Telephone Number(s): _____

SEND COMPLETED FORMS TO:

GTE Information Industry Team
GTE Telephone Operations
600 Hidden Ridge Drive, HQE02G18
P. O. Box 152092
Irving, TX 75015-2092

TRACKING INFORMATION (for GTE use):

Date Received: _____

Date Confirmed: _____

Date Resolved: _____

Resolution Code: _____

PART A - REQUIRED

All questions on this form must be answered in order for your request to be evaluated. Refer to the attached line-by-line instructions for help in completing this form.

NON-DISCLOSURE

If a non-disclosure agreement is desired but not attached, call 214/718-5215 to discuss further.

EXISTING SERVICES/REQUESTS

1. Is the requested service/capability to be used in the provisioning of enhanced service(s)?
Yes _____ No _____

2. What type of service application will the requested service/capability be used to provision?

3. Is this a request for modification of an existing GTE service?

Yes _____ No _____

If yes, please identify the service:

4. Is this request associated with a formal industry request (*e.g.*, Information Industry Liaison Committee (IILC), National ISDN Users' Forum (NIUF), T1, Open Systems Interconnection (OSI) Committee)?

Yes _____ No _____

If yes, please provide the forum, tracking number, and date accepted:

5. Is the requested capability tariffed in another Local Exchange Carrier (LEC) or available through another provider?

Yes _____ No _____ Unknown _____

If yes, please identify the LEC or provider's name and the capability's service name:

DESCRIPTION OF REQUESTED CAPABILITY

1. Provide a functional description of the requested capability.

2. Do you require the requested network capability to be provisioned on circuits, lines, or trunks used by customers, their end users clients, or both?

3. Provide a technical description of the requested capability, including associated Customer Provided Equipment (CPE) and interface requirements.

4. Provide a diagram that illustrates the requested functionality and technical description.

IMPLEMENTATION/DEPLOYMENT FOCUS

Provide the best estimate of the following information:

1. Requested date of service:

2. If the network capability is to be applied to customer end user client lines or trunks, indicate if our deployment focus should be for residence/small business lines or larger business (medium and/or large) lines or trunks.

SWITCHED SERVICE (Both circuit and packet switched)

A. Projected amount of usage

Busy day: _____

Busy hour: _____

Average duration of use: _____

B. Percent of use that will be originating (*i.e.*, traffic received by the customer):

C. Percent of use that will be terminating (*i.e.*, traffic sent by the customer):

D. Identify the NPA/NXX of the customer Serving Central Office(s):

E. Identify the city and/or wire center locations where capability is desired and the estimated demand (in number of lines, trunks, features, etc.) for each location for the next five years:

City/Wire	Crt NXX(s)#	Year 1	Year 2	Year 3	Year 4	Year 5
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

If known and appropriate

PRIVATE LINE/DEDICATED SERVICE

A. Type of service requested:

B. Identify the end point locations of desired circuits and the estimated demand (in number of circuits) for the next five years:

Location A	Location Z	Year 1	Year 2	Year 3	Year 4	Year 5
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

ORDERING AND BILLING INFORMATION

1. If this service is to be provisioned on the customer end users' circuits, lines, or trunks, do you expect this service/capability to be ordered by:

- a. end users _____
- b. customer on behalf of the customer's end users _____
- c. both ways described in a. and b. above _____

2. Will you require end user calling information to bill?

Yes _____ No _____

If Yes, please specify what information is needed for you to bill your customers (*e.g.*, Automatic Number Identification (ANI), start/stop time of call), how you would like this information provided (*e.g.*, paper, magnetic tape), and how often you need it (*e.g.*, daily, weekly, or monthly).

PART B - OPTIONAL

The questions on this form provide additional information which GTE may find useful in analyzing your request. Refer to the attached line-by-line instructions for help in completing this form.

DESCRIPTION OF REQUESTED CAPABILITY

Describe the functional interrelationship (*i.e.*, how the requested capability will be used, what purpose it will serve) between the requested capability and the customer's service itself.

MARKET ANALYSIS

Include any additional information you may have regarding marketing information. This will help in developing business case support for development or modification of network capabilities.

BILLING INFORMATION

1. Are you interested in the telephone company providing billing and collection services to your customers on your behalf:

Yes _____ No _____

2. If this service is to be provisioned on the customer end users' circuits, lines, or trunks, do you expect this service/capability to be billed to:

a. the end user _____

*b. the customer on behalf of the customer's end user _____

*c. both ways describe in a. and b. above _____

*Not all LECs support these billing options.

ADDITIONAL INFORMATION

Please include or attach any information you may have which may assist in the evaluation of the request, including market data.

**SERVICE AND NETWORK CAPABILITY REQUEST FORM
LINE-BY-LINE INSTRUCTIONS**

PART A - REQUIRED

All required questions on this form must be answered in order for your request to be evaluated.

NON-DISCLOSURE

If a non-disclosure agreement is desired but not attached, you may obtain a non-disclosure agreement by calling 214/718-5215.

EXISTING SERVICES/REQUESTS

1. ***Is the requested service/capability to be used in the provisioning of enhanced service(s)?***

Indicate if this requested service, capability or network architecture change is to be used to provision enhanced service.

2. ***What type of enhanced service application will the requested service/capability be used to provision?***

If this request is to be used to provide and enhanced service, indicate the type of enhanced service application this requested service/capability will be used to provision (*e.g.*, value added networks, point-of-sale or electronic funds transfer transaction services, financial or other database services, electronic publishing services, telephone answering services, pay-per-call services, sponsored audiotex services, voice mail services, videotex services, alarm services, electronic mail services.)

3. ***Is this a request for modification of an existing GTE service?***

Indicate if this request is for a modification of an existing service offered by GTE, to which the request is addressed. If it is, identify the existing service.

4. *Is this request associated with a formal industry request?*

Indicate if the request is associated with a formal request with an industry forum. If it is, identify the forum, tracking number and date the formal request was accepted.

5. *Is the requested capability tariffed by another LEC or available through another provider?*

Indicate if the service requested is already tariffed in another LEC or available from another provider (e.g., an Interexchange Carrier). This will enable GTE to contact the other LEC(s)/provider(s) where the service is available to expedite service evaluation. Any information on tariff section, market name, etc., will be helpful.

DESCRIPTION OF REQUESTED CAPABILITY

1. *Provide a functional description of the requested capability.*

Provide a common name and generic description of what the requested network capability does or how it works. Attach additional sheets if necessary.

2. *Do you require the requested network capability to be provisioned on circuits, lines, or trunks used by customers, their end users clients, or both?*

Indicate if the capability will be provisioned to work on circuits, lines, or trunks used by customers, their end user clients, or both.

3. *Provide a technical description of the requested capability, including associated Customer Provided Equipment (CPE) and interface requirements.*

This should include the signaling protocol needed to provide the service/capability, the method of transport from your premise to your serving central office, which type of termination will be required at your premises (line, trunk, PBX trunk, interexchange carrier termination, coin line, etc.), and any central office features/interactions that will be needed to provide the service/capability or network architecture change. Attach additional sheets if necessary.

4. *Provide a diagram that illustrates the requested functionality and technical description.*

Provide a sketch of the requested service indicating the functional relationships/interfaces among the customer, customer's client, and the GTE network. Note the sequence of network functions needed during progress of a call or transaction to support the service. Please indicate if the overall service involves interLATA transport capabilities. Attach additional sheets if necessary.

IMPLEMENTATION/DEPLOYMENT FOCUS

Provide the best estimate of the following information:

1. *Requested date of service:*

Indicate when you would like GTE to deploy your requested network capability.

2. *If the network capability is to be applied to customer end user client lines or trunks, indicate if GTE deployment focus should be for residence/small business lines or larger business (medium and/or large) lines or trunks.*

Residence/small business line customers are those having only one or two line service.

Provide the necessary deployment focus for GTE to accurately analyze this request.

SWITCHED SERVICE (Both circuit and packet switched)

A. *Projected amount of usage*

Busy day:

Provide the day of the week during which the system, on the average, carries the greatest amount of traffic.

Busy hour:

Provide the hour of the day during which the system, on the average, carries the greatest amount of traffic.

Average duration of use:

Provide the sum of the lengths (in minutes or seconds) of all calls during the busiest hour of the day divided by the number of calls.

B. *Percent of use that will be originating (i.e., traffic received by the customer):*

Of the total calls you project to be made, indicate what percentage will be placed by end users to the customer.

C. *Percent of use that will be terminating (i.e., traffic sent by the customer):*

Of the total calls you project to be made, indicate what percentage will be placed by the customer to the end users.

D. *Identify the NPA/NXX of the Customer Serving Central Office(s):*

Provide the Area Code and first three digits of your business telephone number for each location in which you wish to subscribe to the service.

E. *Identify the city and/or wire center, locations where capability is desired and the estimated demand (in number of lines, trunks, features, etc.) for each location for the next five years:*

Provide a five year forecast estimate for each city and/or wire center location based on your expected customer demand. **If available and appropriate,** include the first three digits of the telephone numbers where the service is to be deployed. The information should be provided in lines, trunks, features, or other applicable measurement (where appropriate, customers will be given the option of providing demand forecasts in other units). For example:

City/Wire	Crt NXX(s)#	Year 1	Year 2	Year 3	Year 4	Year 5
		100	150	200	250	300
IRONTOWN	555	Lines	Lines	Lines	Lines	Lines

Attach additional sheets if necessary.

PRIVATE LINE/DEDICATED SERVICE

A. *Type of service requested:*

Indicate which type of service is requested, *i.e.*, metallic, telegraph, voice grade (300-3000 Hz), program audio (indicate bandwidth required), video (indicate audio bandwidth required or video bandwidth required), digital (indicate speed required), derived channel (indicate speed required), alert transport, network access link (indicate interface required), or other.

B. *Identify the end point locations of desired circuits and the estimated demand (in number of circuits) for the next five years:*

Provide a five year forecast estimate for each desired circuit location based on your expected customer demand. The information should be provided in number of circuits (where appropriate, customers will be given the option of providing demand forecasts in other units). For example:

Location A	Location Z	Year 1	Year 2	Year 3	Year 4	Year 5
		200	300	400	500	600
WIRECNTR	WIRECNTR	CKTS	CKTS	CKTS	CKTS	CKTS

Attach additional sheets if necessary.

ORDERING AND BILLING INFORMATION

1. *If this service is to be provisioned on the customer end users' circuits, lines, or trunks, do you expect this service/capability to be ordered by:*

- a. end users
- b. customer on behalf of the customer's end users
- c. both ways described in a. and b. above

2. *Will you require end user calling information to bill?*

Indicate if you will require end user calling information for billing purposes. If Yes, indicate what information you need from GTE (*e.g.*, Automatic Number Identification (ANI), start/stop time of call), how you would like this information provided (*e.g.*, paper, magnetic tape, and how often you need it (*e.g.*, daily, weekly, or monthly).

PART B - OPTIONAL

The questions on this form provide additional information which GTE may find useful in analyzing your request.

DESCRIPTION OF REQUESTED CAPABILITY

In addition, please describe the functional interrelationship between the requested capability and the customer's service itself.

Describe the functional interrelationship (*i.e.*, how the requested capability will be used, what purpose it will serve) between the requested capability and the service. A full description of the service is not required, but may assist in determining the optimal network solution.

MARKET ANALYSIS

Please include any information you may have regarding market information. This may include:

- A description of the known or anticipated efforts of new/emerging technologies on the functionality, interface requirements, life cycle, or other aspects of the requested capability.
- An estimate of your demand at various price points (can help identify the relationship between "willingness to pay" and expected demand).
- The percentage of total lines, by line type (residence lines, business lines, etc.) expected to subscribe to the requested network capability over a five year period.
- By line type: the percent individual customer market share (end user lines) as compared to total expected market penetration.
- The period over which demand is expected for the network functionality across its four stage life cycle, including introduction, growth, maturity, and decline.

Attach additional sheets if necessary.

ORDERING AND BILLING INFORMATION

1. ***Are you interested in the telephone company providing billing and collection services to your customers on your behalf:***

The customers have the option of identifying their possible interest in the LEC's billing and collection services.

2. ***If this service is to be provisioned on the customer end users' circuits, lines, or trunks, do you expect this service/capability to be billed to:***
 - a. the end user
 - *b. the customer on behalf of the customer's end user
 - *c. both ways described in a. and b. above

*Not all LECs support these billing options.

ADDITIONAL INFORMATION

Provide any additional information you may have that has not been asked for in this application, but which may be useful for the evaluation of this network capability request, *e.g.*, marketing information. Attach additional sheets if necessary.